

ROBERT C. BYRD HONORS SCHOLARSHIP

This scholarship program is authorized under Title IV, Part A, Subpart 6 of the Higher Education Act of 1965, as amended.

APPLICATION INSTRUCTIONS

2009-2010

Application Deadline:
March 27, 2009

General Information

The *Robert C. Byrd Honors Scholarship Program* is a federally funded program to promote student excellence and to recognize graduating seniors who demonstrate the possibility for continued educational success in college. Scholarships are awarded on the basis of merit for the first year of study at an accredited institution of higher education. Awards are subject to the availability of congressional funding and may be received for a total of four years or \$6,000.

Eligibility Requirements

All applicants must meet the following requirements:

- Be a 2009 graduate of a Utah public or private secondary school or have the equivalent of a certificate of graduation recognized by the state.
- Home-schooled students are eligible for the scholarship.
- Be accepted for 2009 full-time enrollment in an accredited institution of higher education (any public or private nonprofit institution of higher education, or proprietary post-secondary vocational institution, as defined in section 481 of the HEA). Scholarship funds will be awarded to the accredited institution of higher education. Scholarships cannot be awarded for students enrolled in a military service academy. **A copy of the letter of acceptance must be included with the application. Letter must have school seal or logo.**
- Demonstrate outstanding academic achievement and show promise of continuing education.
- Achieve a minimum ACT score of 25 or SAT score of 1940 and a high school grade point average (GPA) of 3.70. Include documentation of tests scores.
- Proof of U.S. citizenship is required in the form of one of the following documents: birth certificate, social security card, documentation that you are a permanent resident, or proof of citizenship through Immigration. You must be a Utah resident even though you may attend an institution of higher education outside the State (e.g., military). Please include proof of registration with Selective Service (if you are 18 years old at time of application).

Application Procedure

Complete all sections of application.

Please refer to the final checklist to be sure all materials are included before mailing.

- 1) Please print the application and forms on plain white paper and staple all documents in the upper left-hand corner. Type or print in BLUE ink; do not include pages one and five with the completed application. Applications received late, incomplete, in binders, or with report covers will NOT be accepted.
- 2) Applications must have original signatures; no copies, faxed or otherwise, will be accepted. Please submit all forms to:

**The Robert C. Byrd Scholarship
Utah State Office of Education
250 East 500 South, P.O. Box 144200
Salt Lake City, Utah 84114-4200**

- 3) Applications that include any additional information, such as letters of recommendation, photographs, or any other extra documents, will be denied.

NONDISCRIMINATION STATEMENT: The Utah State of Education does not discriminate on the basis of race, color, national origin, sex, age, or disability in admission or access to, or treatment or employment in its educational programs or activities. The following person has been designated to handle inquiries regarding the nondiscrimination policy: Brenda Hedden, Utah State Office of Education, 250 East 500 South, P.O. Box 144200, Salt Lake City, Utah 84114-4200, (801) 538-7742.

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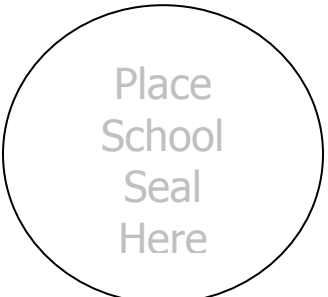
2009-2010
APPLICATION

PLEASE TYPE OR PRINT LEGIBLY

Section 1: Personal Data

NAME		SCHOOL	
ADDRESS		SCHOOL DISTRICT	
CITY, COUNTY, STATE, ZIP		CONGRESSIONAL DISTRICT NUMBER	
TELEPHONE	CELL PHONE	PARENT OR GUARDIAN	
EMAIL ADDRESS		PARENT OR GUARDIAN EMAIL ADDRESS	
Are you a Utah resident and U.S. citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No (Proof of citizenship and residency are required)		DATE OF BIRTH	
Are you registered with the Selective Service? <input type="checkbox"/> Yes <input type="checkbox"/> No (If NO, check appropriate box below.) <input type="checkbox"/> I am female. <input type="checkbox"/> I have not reached my 18 th birthday. <input type="checkbox"/> I am in the armed services on active duty.			
NOTE: If you are required to register with Selective Service (www.sss.gov), you must be registered in order to receive Title IV financial aid. If you purposely give false or misleading information, you will be subject to a fine, imprisonment, or both.			
List institution of higher education <input type="checkbox"/> Public or <input type="checkbox"/> Private		Attach a copy of the acceptance letter(s) from the institution of higher education.	
INSTITUTION OF HIGHER EDUCATION MAILING ADDRESS		CITY, STATE, ZIP	
APPLICANT SIGNATURE	DATE	PARENT/GUARDIAN SIGNATURE	DATE

Section 2: Education Data (TO BE COMPLETED BY SCHOOL GUIDANCE COUNSELOR)*

HIGH SCHOOL NAME AND MAILING ADDRESS			
Grade point average (GPA) _____ Cumulative GPA on an unweighted 4.0 scale		ACT Composite Score _____	
Class rank _____ out of _____ students		SAT Composite Score _____	
I certify that the above information (Section 1 and 2) is complete and accurate AND have attached the original transcript.			
		SIGNATURE	
		PRINT NAME	
		OFFICIAL TITLE	
		DATE	TELEPHONE NUMBER

***Home-school students submit ACT or SAT Composite Score with documentation.**

ROBERT C. BYRD HONORS SCHOLARSHIP—2009-2010 Application

Section 3: Certification of Eligibility for Federal Assistance in Certain Programs

I declare section 34 of CFR 75.60, 75.61, and 75.62 requires I make specific certifications of eligibility to the U.S. Department of Education as a condition of applying for Federal funds in certain programs, and these requirements are in addition to any other eligibility requirements that the U.S. Department of Education imposes under program regulations.

I. I declare:

A. I do not owe a debt, am currently repaying a debt, or am not in default on a debt (as that term is used at 34 CFR Part 668):

1. To the Federal Government under a non-procurement transaction (e.g., a previous loan scholarship, grant, or cooperative agreement); or
 2. For a fellowship, scholarship, stipend, discretionary grant, or loan in any program of the U.S. Department of Education that is subject to 34 CFR 75.60, 76.61, and 75.62, including:
 - Federal Pell Grant Program (20 U.S.C. 1070a, et seq.);
 - Federal Supplemental Educational Opportunity Grant [SEOG] Program (20 U.S.C. 1070b, et seq.);
 - State Student Incentive Grant Program [SSIG] (20 U.S.C. 1070c, et seq.);
 - Federal Perkins Loan Program (20 U.S.C. 1087aa, et seq.);
 - Income Contingent Direct Loan Demonstration Project (20 U.S.C. 1087a, note);
 - Federal Stafford Loan Program, Federal Supplemental Loans for Students [SLS], Federal PLUS, or Federal Consolidation Loan Program (20 U.S.C. 1071, et seq.);
 - Cuban Student Loan Program (20 U.S.C. 2601, et seq.);
 - Robert C. Byrd Honors Scholarship Program (20 U.S.C. 1070d-31, et seq.);
 - Jacob K. Javits Fellows Program (20 U.S.C. 1134h-1124l);
 - Patricia Roberts Harris Fellowship Program (20 U.S.C. 1134d-1134g);
 - Christa McAuliffe Fellowship Program (20 U.S.C. 1105-1105i);
 - Bilingual Education Fellowship Program (20 U.S.C. 3221-3262);
 - Rehabilitation Long-Term Training Program (29 U.S.C. 774[b]);
 - Paul Douglas Teacher Scholarship Program (20 U.S.C. 1104, et seq.);
 - Law Enforcement Education Program (42 U.S.C. 3775);
 - Indian Fellowship Program (29 U.S.C. 774[b]);
- or -

B. I made satisfactory arrangements with the U.S. Department of Education to repay a debt as described above in A1 or A2.

II. I have not been declared by a judge ineligible to receive Federal assistance for the period of this requested funding as a condition of sentencing under Section 5301 of the Anti-Drug Abuse Act of 1988 (21 U.S.C. 862).

I accept liability and understand if I provide false information about any of the above statements I must repay the U.S. Department of Education for funds awarded through this scholarship. I may be subject to civil penalties and criminal prosecution as stated under section 18 of the U.S.C. 1001.

APPLICANT NAME (TYPE OR PRINT)	APPLICANT SIGNATURE	DATE
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For Utah State Office of Education Use Only:			
_____ GPA	_____ Applicant Signatures	_____ Certification of Eligibility	
_____ ACT/SAT Scores	_____ Parent Signatures	_____ High School Transcript	
_____ Combined Score	_____ HS Counselor Signature	_____ College Acceptance	
_____ Agreement Form	_____ U.S. Citizen/UT Resident	_____ School Seal	

***** AGREEMENT FORM *****
2009-2010 Robert C. Byrd Honors Scholarship

Please initial below that you understand the scholarship rules and regulations.

_____ **Qualified Institution of Higher Education:** I understand federal rules require I attend an accredited institution in one of the fifty United States, the District of Columbia, Puerto Rico, the Virgin Islands, Guam, the Northern Mariana Islands, American Samoa, or the Freely Associated States (the Federated States of Micronesia, the Republic of the Marshall Islands, and the Republic of Palau). I understand I must be receiving academic credits (full time status) from said institution and maintain satisfactory academic progress. I understand accredited military academies cannot receive this money.

_____ **Distribution of Funds:** I understand if my Robert C. Byrd Honors Scholarship is combined with other forms of federal financial assistance, the amount of the Robert C. Byrd Honors Scholarship will be reduced by the amount which exceeds the cost of attendance for one year of school.

_____ **Military Selective Service:** I understand as a male recipient, I am required to register with the Selective Service when I reach 18 years of age.

_____ **First Year:** If I cease full-time attendance during my first year of study, I understand the Robert C. Byrd Honors Scholarship will be forfeited. **I must begin my freshman year in the fall of 2009, and no leave of absence will be granted. I understand I must attend classes full-time and be in good academic standing for the entire first year.** The Agreement Form must be received by the Utah State Office of Education by June 30, 2009 or my scholarship will be forfeited.

_____ **Renewal:** I understand I must be enrolled as a full-time student and be in good academic standing. This scholarship is renewable for a total of four years or up to \$6,000 dollars. The award amount may change based upon annual funding. This scholarship can be applied only to undergraduate study; if I graduate early, I will forfeit all remaining scholarship funds. **The Agreement and Eligibility Forms, copy of UT driver's license and itemized expenditure list must be postmarked by June 30, 2010 to renew the scholarship yearly.** Failure to submit these forms will result in forfeiture of the scholarship.

_____ **Forfeit Information:** I understand I may forfeit my scholarship, if I am dismissed, placed on disciplinary probation, drop below full-time status, or withdraw. I agree to contact the Utah State Office of Education within 30 days of withdrawal and will refund/repay the Robert C. Byrd Honors Scholarship funds or portions thereof to be in compliance with the Higher Education Institution's policy.

_____ **Waivers:** I may apply for a waiver from the Utah State Office of Education after one year of full-time attendance; however, application does not guarantee approval. Waivers will be granted due to military service, religious or charitable service, foreign study or personal or family emergency. **Waivers must be requested eight weeks in advance of the leave of absence. The request must be accompanied by supporting documentation from the military unit, religious or charitable organization, or physician.** Based on federal legislation, only one waiver will be granted and may not exceed twelve months.

PLEASE MAKE A COPY OF THIS SIGNED AGREEMENT FOR YOUR RECORDS

I understand the above Robert C. Byrd Honors Scholarship Rules and Regulations and I agree to abide by them.

Name _____

Signature _____

Date _____

FINAL CHECKLIST
ROBERT C. BYRD HONORS SCHOLARSHIP APPLICATION

ROBERT C. BYRD HONORS SCHOLARSHIP—2009-2010 Application

Complete all sections of application.

Please refer to this final checklist to be sure all materials are included before mailing.

- ☐ Section 1
 - Applicant's personal data
 - Applicant's signature
 - Parent's/guardian's signature
- ☐ Section 2 (completed by school guidance counselor) * -Submitted transcripts must remain sealed.-
 - High school name and address
 - School seal
 - G.P.A.
 - Test scores
 - Guidance counselor's signature
 - Official high school transcript or equivalent
 - Home-schooled students submit ACT or SAT scores*
- ☐ Section 3
 - Applicant's signature
- ☐ Section 4
 - Agreement form
 - Applicant name and signature
- ☐ Copy of ACT/SAT scores
- ☐ Copy of acceptance letter(s) from the institution(s) of higher education
 - Top three choices
 - Letter(s) **must** have school seal or logo
- ☐ Application procedures are listed below:
 - Include applicant's name and signature.
 - Print the application on plain white paper and staple the documents in the upper left-hand corner.
 - Applications received late, incomplete, in binders, or with report covers will be denied.
 - High school official transcripts **must remain in original sealed envelope**. Opened transcripts will not be accepted. Sealed transcripts can be stapled or paperclip to final application.
 - Applications must have original signatures; no copies, faxed or otherwise, will be accepted.

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 - Male applicants need proof of registration with Selective Service (if you are 18 years old at time of application).

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